

TENNESSEE DEPARTMENT OF AGRICULTURE

CONSUMER AND INDUSTRY SERVICES – ATTN: DAIRY SECTION BOX 40627 MELROSE STATION NASHVILLE, TENNESSEE 37204 PHONE # 615-837-5536 FAX # 615-837-5005

APPLICATION FOR TESTER LICENSE 201_ - 201_

Pursuant to T.C.A. §53-3-105, any person who buys or receives milk or cream on the basis of its chemical or physical constituents must be, or must have in his employ, a licensed milk tester. The fee for a tester license is \$50. The fee is waived for any person who applies for the license and is employed exclusively by a licensed dairy products plant, trade products plant, or frozen dessert manufacturer.

All licenses expire on June 30 following their issuance. License fees for renewal must be remitted to the Department by July 16 following expiration of the license. Nonpayment of the license fee by July 16 will result in and additional late charge of \$25 for renewal of the license. Checks should be made payable to the Tennessee Department of Agriculture and mailed with this completed form and enclosed return envelope.

| FEE IS NOT REQUIRED IF TESTER IS EMPLOYED BY LICENSED DAIRY OR FROZEN DESSERT MANUFACTURER PLEASE COMPLETE FORM TO GENERATE LICENSE | | | |
|--|---|---------------|------|
| APPLICANT | | | |
| ADDRESS | CITY | STATE | ZIP |
| PHONE NUMBER | EMAIL ADDRESS | | |
| EMPLOYER_ | MANAGER | | |
| ADDRESS | CITY | STATE | ZIP |
| PHONE NUMBER | EMAIL ADDRESS | | |
| IS THE APPLICANT EMPLOYED EXCLUSIVELY BY THIS EMPLOYER? □ YES □ N EMPLOYER'S DAIRY PLANT OR FROZEN DESSERT MANUFACTURER LICENSE NO. | | | |
| Information reported in this application is correct and complete to the best of my information and belief. | | | |
| NAME (PRINT) | PERMIT NUMBER (if applicant is seeking renewal) | | |
| SIGNED | DATEA | MOUNT ENCLOSE | D \$ |
| Pre-printed portions of this form represent information on file with the Department. Please strike and correct as appropriate. | | | |